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THE UNIVERSITY of EDINBURGH



THE ASSET-BASED INDICATOR FRAMEWORK (ABIF): A PRACTITIONER'S GUIDE TO CO-PRODUCTION

Training Pack

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INTRODUCTION

The Asset-Based Indicator Framework (ABIF) was created to:

- work with communities to identify and capture “soft” outcomes inherent in asset-based working.
- show how these outcomes link to local, national and international targets, measures and policies. (Or maybe they don't. Maybe outcomes and targets identified by community members aren't aligned with performance measurements and policies. Could this be an opportunity for change?)
- evidence changes (if any) in health, wellbeing and equity linked to asset-based work over time.
- evaluating creative community engagement.
- monitor the effectiveness of asset-based work to engage community members and co-produce services.
- monitor and account for asset-based activity across topics and services (beyond health).

This is not an exhaustive list of what the framework could be used for. These are prompts – the start of a conversation to be continued in the community of practice.

Some useful definitions

Co-production is about combining the knowledge, skills and experience of people who use services, deliver services and commission services, and working together on an equal basis to achieve positive change and improve lives and outcomes (Scottish Co-production Network 2017).

The asset-based approach to health improvement is based on Antonovsky's concept of salutogenesis. A key aspect of his theory is the idea that having control of one's life and circumstances is health enhancing (Eriksson & Lindström, 2006). Central to the assets approach is the idea of helping people to be in control of their lives by developing the capacities and capabilities of individuals and communities (Annual Report of the Chief Medical Officer 2010).

Creative community engagement can be anything that a community finds interesting and engaging (ranging from theatre, music, arts, sports to digital technology, social media, knitting, cooking and way beyond). These are just some examples – the community decides how it wants to engage.

To measure **CHANGES** in health and inequalities through creative community engagement, we need to understand



the **CONTEXT** of the asset-based intervention, activity or programme. Without context, the data collected might be meaningless and changes might be difficult to “measure”. Context is linked to



the **POLICY** environment – **local, national and international policies**, plans and priorities need to be considered. Changes evidenced using the ABIF can then be linked to local, national and international outcomes. Communities are clearly impacted by the policy environment and structural issues.

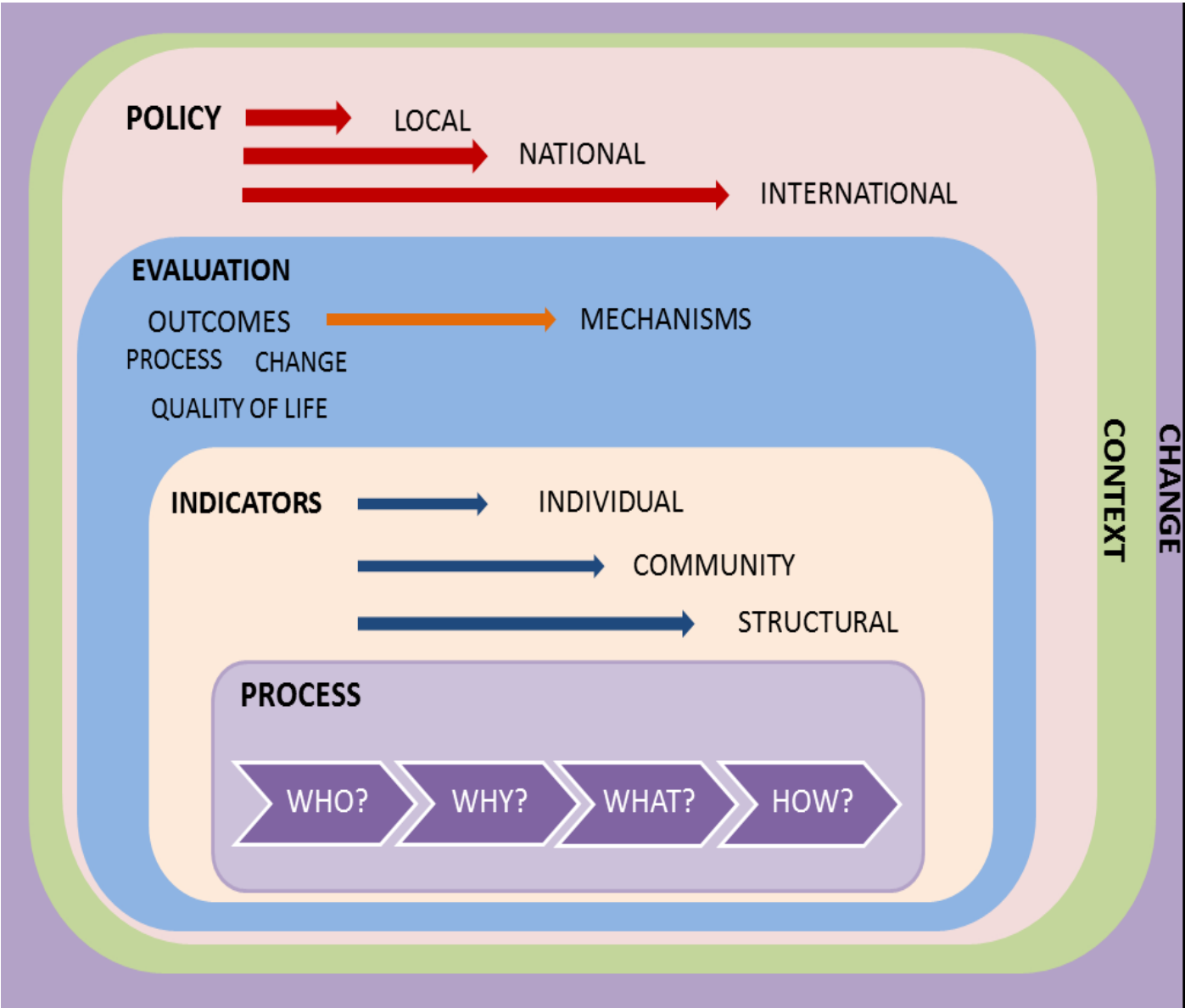


As an **EVALUATION** tool, the ABIF **captures process, change and quality of life outcomes**.



The ABIF is co-produced with communities. As communities are comprised of community members, the ABIF captures **CHANGES AT INDIVIDUAL, COMMUNITY and STRUCTURAL LEVELS**.

The journey of co-producing the ABIF and how it can be used as an evaluation tool can be summarised in the diagram below.



The framework application starts the first time you engage with a community. If you get ‘stuck’ at any stage of the application go back to the first level ‘Process’ and rethink the Who? Why? What? How? questions. Remember that it is all about capturing the process of change.

ABIF APPLICATION

Level 1. CONTEXT

Context is a critical feature in the evaluation of outcomes. It would be useful, for example, to analyse quantitative data by considering contextual information. If using numerical scales practitioners should look for shifts over time instead of having a clear definition of what each score means. They should look for patterns in behavior changes, and identify how many engagements they need to have with participants before change happens. For example, if you are evaluating a self-harming intervention and an individual's social network scores initially go down, it is important to understand why this happened before concluding that there is no improvement in social connectedness. The low score might be a result of the fact that self-harming patients often need to let go of people with whom they have damaging relationships before they build their own self-esteem and are able to reach out to new people.

HOW DOES CONTEXT IMPACTS THE ENGAGEMENT?

What is the social, cultural and political context in which the engagement is happening? How might the context of the engagement have an impact on the development of trust between you and the community? How can trust be built in the specific context?

HOW DOES CONTEXT IMPACT EACH INDICATOR?

What is the relationship of each indicator with the context?

HOW DOES CONTEXT INFLUENCE THE FORMATION OF OUTCOMES?

What are the contextual factors that determine the outcomes? Community? Policy? Environment? Other?

Be culturally sensitive by understanding the context in which outcomes are measured.

CONTEXT

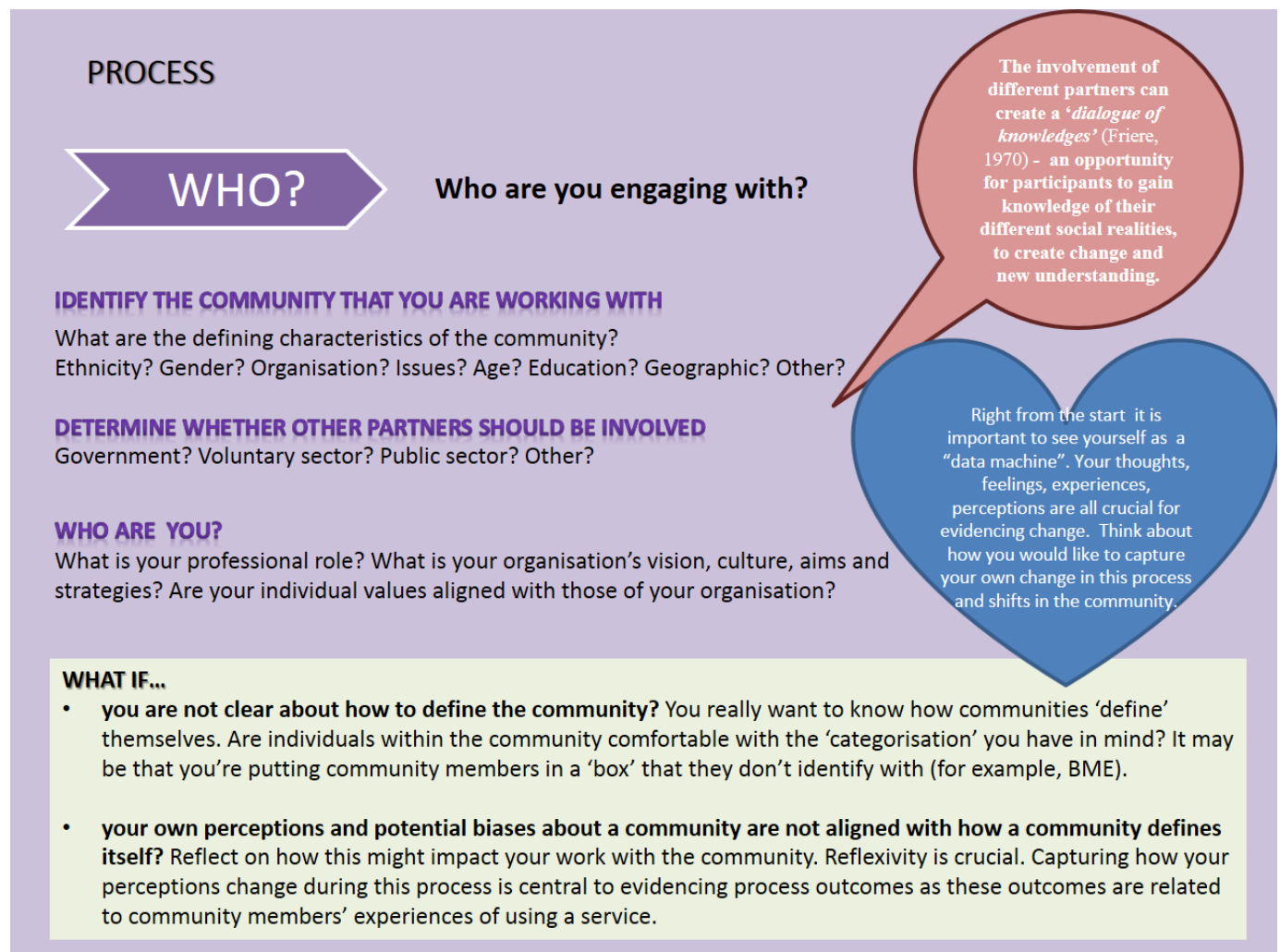
Make sense of quantitative data by considering contextual information.

An increase in scoring may not necessarily reflect improved outcomes.

The context needs to be considered if the data is to be meaningful.

Level 2. PROCESS

The first level of ABIF application is called “Process”. It happens at the start of the actual engagement with the community and serves as a baseline for further ABIF co-production. The Process consists of four main steps: Who? Why? What? How?



The knowledge you acquire and evidence that you collect will link to local, national and international policies on equality, community empowerment, poverty and sustainability.

WHY?

**Why are you engaging with this community?
Why now?**

WHAT WOULD YOU LIKE TO ACHIEVE FROM THIS ENGAGEMENT?

In the short, medium and long-term? What would you like to know? What would you like to change? What is the relevance of engaging now? Does the community want to engage for the same reasons as you?

IS THERE A REASON WHY YOU ARE ENGAGING WITH THIS COMMUNITY NOW?

What is the policy context? Is there a pressing issue? Is there something the community wants?

Reflect on what your own intentions are as a practitioner and as a person. Remember you are seeking to 'measure humanity'. We are not aiming to tick consultation boxes. Be true to the process.

WHAT IF...

- **what you want is different to what the community wants?** Part of the process of co-production involves understanding differences and negotiating potential ways forward. Capturing how you negotiate differences is central to process outcomes and change outcomes – it's related to communities' experiences of services and will help you understand what improvements community members are seeking.
- **community members think that you are not seeking genuine engagement and this is tokenistic?** Co-production involves building trust and sustaining relationships. It is crucial to engage on a continuous basis (what is reasonable) and not parachute in to a community to suit organisational objectives. This is important to capture quality of life outcomes (the perceived quality of an community member's daily life). Be transparent about lack of resources and capacity so the community is aware of the challenges you face. Stay engaged in open conversation. Radical honesty all the way!

How has using creative community engagement changed the way you think about what is evidence in policy and practice? How has it changed the way you think of and collect 'data'?

WHAT?

What are you going to do?

HOW ARE YOU GOING TO ENGAGE?

Participatory action research? – PAR is about “jointly producing knowledge with others to produce critical interpretations and readings of the world, which are accessible, understandable to all those involved and actionable.” (1). Asset mapping? Creative approaches – music, theatre, singing, art, food, sport, media? Other?

WHICH IS THE MOST APPROPRIATE ENGAGEMENT METHOD FOR THIS PARTICULAR COMMUNITY?

Have you looked at good practices to inform your method of engagement?

WHAT RESOURCES DO YOU HAVE?

Are you willing to change how resources are distributed depending on community members' wishes even if this did not align with strategic aims?

HOW ARE YOU GOING TO RECRUIT PARTICIPANTS?


Do you have access to local community champions in your network?

Is flyering or word of mouth the most effective way of recruiting?

Reflect on how relationships with community members have evolved. How does that influence your professional practice?

WHAT IF...

- **community members do not want to engage in the way you are suggesting?** How you engage should be negotiated with the community. Community members should feel that they are being listened to and there is a shared understanding. Some may lean towards the arts (singing, dancing, theatre, music or other). Others may want to be outdoors in greenspaces or in the kitchen. As long as it's feasible and ethical, anything may be possible!
- **resources and capacity are problems?** Think of ways in which the community is already engaging in creative activities. Can you join them? Is there a way to link up with other organisations to pool resources and capacity? Maybe others are already engaged with a particular community and you could get involved too? Perhaps you can apply for joint funding to develop and sustain your engagement? Be creative and also critical – it's important to be vocal about the support you need to work in this way.
- **the community is not open for you to engage in existing activities?** Building trust with the community is fundamental to the process of co-production. Try to understand why the community does not want you to be a part of this process. Is there a way to build trust and convince them over time?



Record the data continuously and rigorously throughout the whole engagement process.

How are you capturing data?



HOW?

HOW ARE YOU GOING TO CAPTURE AND RECORD THE DATA SYSTEMATICALLY?

What is the most appropriate way of collecting data from the community you are engaging with? Pictures? Reflective diaries? Questionnaires? Semi-structured interviews? Video? Audio? Drawing? Other?

IS DATA RECORDED TOGETHER WITH COMMUNITY MEMBERS?


Do community members know what data is recorded? What data is important to them? What are the challenges related to the recording practice?

HOW OFTEN ARE YOU GOING TO ENGAGE?

A single event? Weekly? Quarterly? Monthly? Other?

HAVE YOU CONSIDERED ANY ETHICAL ISSUES? ARE THERE ANY RISKS TO YOU OR THE COMMUNITY?

How are you going to store the information safely? Has the data been anonymised? Have you provided an information sheet with the reason of engagement and a consent form?



Reflect on what is important for the community when recording the data.

WHAT IF...

- **community members do not feel comfortable with the way you want to collect data?** The idea is to collect data from community members in the way that feels most appropriate to them. They should have a chance to voice how and why they think the method they're proposing is more appropriate than others. For example, literacy may be an issue so visual methods more fitting. You should also negotiate how data will be shared. Are there any ethical issues. Is the community happy to sign informed consent sheets?

Level 3. INDICATORS

The second level of application is to define the indicators that are important to the community. The indicators are all the assets or attributes that are important to the community – they ones they want to develop and see change in.

Initially, 10 indicators were identified after an extended critical literature review on asset-based approaches, co-production and related underpinning concepts (social capital, resilience and wellbeing). After co-producing the framework with community members and professional stakeholders, some of the indicators were amended (for example, affect was changed to happiness) and others were separated into two different categories (for example, spirituality and personal meaning are no longer one indicator but two; the same applies for access to resources and healthy environment).

The ABIF Template, consisting of 13 indicators, is offered as a tool to be applied at the start of the creative community engagement. It helps us agree on definitions for indicators so we know what these indicators mean to the community at the start. It also allows us to capture baseline data. Professionals should expect that predefined indicators may be misunderstood by community members if they use the terms differently. When provided with definitions, however, they may find it easier to relate the indicator to their community contexts and rate them accordingly. If community members ask for a definition, you can use the table provided in Appendix 1.

Indicators need to be “measured” at:

- the start of a community engagement
- throughout the engagement process and
- at the “end” of a co-produced initiative (if there is one).

This allows us to capture changes that communities want to see.

Indicators can help us identify ways to illustrate **HOW** and **WHY** changes are occurring (or not occurring) while asset-based initiatives are being implemented.

TABLE WITH INDICATORS

How do community members 'understand' each of these indicators? Are they all relevant to them? Should others be included?

Indicator	Happiness	Access to Resources	Healthy Environment	Culture	Empathy	Helpfulness	Interpersonal Relationships	Optimism	Physical Health	Self-determination	Spirituality	Personal Meaning	Trust
Definition													
Individual level													
Community level													
Structural level													

We are interested in the interrelationship between the three levels

DISCUSSION GUIDE

Practitioners can use the discussion guide to prompt discussions around the ABIF if appropriate.

- Flexibility in using the guide **is recommended**.
- Professionals should take into consideration group and discussion dynamics.
- It is **FINE** not to ask all questions or to **INCLUDE NEW QUESTIONS**. This should be recorded.

1. Introduction to ABIF

- Provide each participant with a copy of the template. If you are working in a big group split participants into small groups. Introduce the indicators from the table gradually so that participants have the time to look at each indicator.

2. Rate these indicators in order of importance to you [1 through....].

- Ask community members to rate each indicator individually in order of importance to them. Ask the group to discuss how they rated the indicators. Ask the group to come to a consensus on the order of indicators.

3. Define each indicator in simple terms

- After rating the indicators, ask community members to define the indicators in simple terms. The definition is then discussed in the group and any differences identified.

4. Come to a consensus about the order of importance of indicators

- Ask community members to come to a consensus on the order of importance of indicators as a group.

5. How would you practically 'do' these indicators?

- Ask participants about the practical implications of their 'most important' indicators. For example, "How would you show someone you empathise with them?" Then ask participants to discuss this in the group on individual, community and structural levels.

6. In which indicators would you like to see change?

- Ask community members to identify the indicators in which they want to experience change.

7. What would you like to do to experience change?

- Ask participants what they would like to do (what type of engagement) to experience a change in the identified indicators.

When applying the mechanism consider following points:

Step 1. Apply the ABIF template

WHAT IF...

community members are illiterate? Ask community members how they would prefer to discuss or capture information. Do they want to draw, sing or act instead? Filming? Audio? Other means of data capturing?

Step 2. Ask community members to rate these indicators in order of importance to them

WHAT IF...

community members ask whether they should rate the indicators from an individual or community perspective? Encourage community members to think about their preference and leave the choice to them. Your role is to note the choice they have made and to understand why they have made it.

there are significant differences in the rating between individuals? Discuss this in the group and determine how it might impact the process of prioritising the aims of the engagement.

Step 3. Ask community members to individually define indicators

WHAT IF...

community members can't make sense of all indicators? The indicators are provided as a starting point for engagement and are not intended to be prescriptive. It is expected that community members may not wish to include some of the indicators in their co-produced framework. Some attributes or assets may not be meaningful to them. If, however, community members want you to give them a definition of the 'unclear' indicators you can refer to [Definitions of Indicators.pdf](#).

community members want to add a new indicator? Community members may indeed change or add new indicators to their co-produced framework. It is important for you to understand what each

Step 4. Ask the group to come to a consensus about the order of importance of indicators

Observe how the group comes to a consensus. Are there 'leaders' in the group? Are there 'observers'? What is the group dynamics? What are the group relationships? How might these relationships impact the process of engagement? Are group members open to learning together, exploring together and working to achieve goals together? Are differences between definitions 'resolved'? How?

WHAT IF...

the group doesn't come to a consensus? Note down why community members disagree and reflect on how this might impact the engagement process. If you can't get a consensus then you need to 'redefine' the community. Is this a community? What are their commonalities?

Step 5. Ask community members how they would practically do each of the indicators important to them

WHAT IF...

the group isn't sure what you mean? Think of some practical examples that make sense to you. How would you show somebody that you empathise with them?

STEP 6. Ask community members which indicators they most want to see change in? How do they want to see these changes?

WHAT IF...

the group wants different things? See if you can reach a consensus through skilful negotiation. Capacity and resourcing may be an issue so ask the group if there's anything they can all agree on. Negotiating what may or may not be possible is a key part of the co-production process.

Step 7. Ask community members what they want to do to experience change in the indicators?

WHAT IF...

the group isn't sure how they get involved? Facilitate a discussion on how they can be agents of change. Signpost them to existing services or initiatives in the area.

Level 4. OUTCOMES

The third level of ABIF application is the identification of the outcomes that practitioners and community members want to achieve. Three main outcomes are relevant to asset-based working - *process, change and quality of life outcomes*.

Process outcomes are related to community's experiences of using a service.

Change outcomes refer to the improvements that community members are seeking.

Quality of life outcomes include features of a person's whole life that they are working towards achieving or maintaining in partnership with services and other forms of support.

It is also important to account for any **emergent outcomes** as they arise through continuous engagement.

OUTCOMES

WHAT ARE THE DIFFERENT OUTCOMES THAT YOU NEED TO IDENTIFY?

Have you considered capturing process, change and quality of life outcomes?

Process outcomes are related to community's experiences of using a service.

Change outcomes refer to the improvements that community members are seeking.

Quality of life outcomes include features of a person's whole life that they are working towards achieving or maintaining in partnership with services and other forms of support.

Consider the meaning of outcomes for community members and their own views of what they want to achieve.

Have you considered capturing short-term, medium-term and long-term outcomes?

WHAT IS THE ENDPOINT THAT YOU WANT TO REACH THROUGH THE ENGAGEMENT?

Consider what activities and processes would be required to achieve it.

Reflect on the process of change by keeping a reflective diary. If change is not happening reflect on 'why' it isn't.

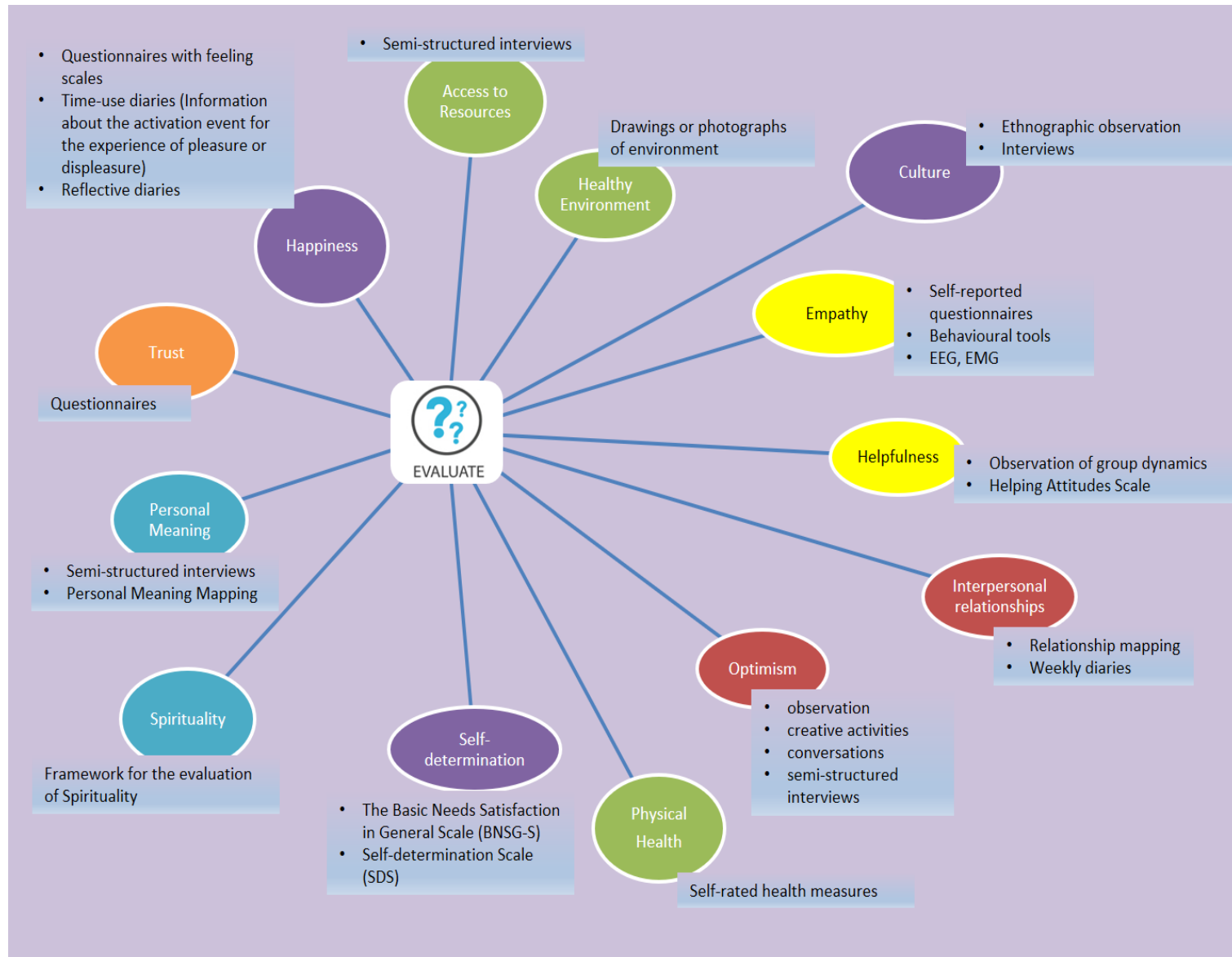
HOW DOES YOUR ENGAGEMENT WORK?

What is the process by which change comes for this particular community?

WHAT IF...

- **Community members do not agree with the outcomes you want to achieve?** Your role is to understand what outcomes individuals want to achieve and what support they would need to achieve these outcomes.
- **Community members show resistance or a disbelief that change can happen?** Listen, acknowledge feelings, respond empathetically and encourage support. If you accept people's response, they will continue to tell you how they are feeling. This will help you respond to some of their concerns.
- **Change does not happen?** The process of co-production is flexible. Your methods of working might need to be adjusted as the engagement progresses. This is a crucial feature in asset-based working.

The following map presents ways of measurement for each indicator. Each of these measurement approaches is presented and explained in Appendix 2.



Level 5. POLICY

The final stage of the ABIF application is aligning identified outcomes from the engagement to local, national and international policies. The table below illustrates how outcomes might be linked to policies.

Outcome level	Focus	Example
Individual	Defined by the person as what is important to them.	I want to be able to freely access services.
Local	Defined by the local authority as key area to work towards.	Barriers to HSCP services are removed for people with relevant protected characteristics. (Glasgow HSCP Equality Outcomes)
National	Defined by government to focus activity across sectors and organisations.	Our public services are high quality, continually improving, efficient and responsive to local people's needs. (National Performance Framework, Scottish Government)
International	Defined by international bodies such as the World Health Organization	Achieve universal health coverage, including financial risk protection, access to quality essential health-care services and access to safe, effective, quality and affordable essential medicines and vaccines for all. (Sustainable Development Goals, United Nations)

Appendix 1. Indicators

The table serves as an illustration of how each indicator might have an impact on the individual, community and structural level.

Indicator	Definition	Individual Level	Community Level	Structural Level
Happiness	<p>Veenhoven (1995) defined happiness or life satisfaction as the degree to which one judges the quality of one's life favourably (p.34).</p> <p>Initially, the extended literature review identified 'affect' as an indicator impacting health and wellbeing. However, here we are referring to happiness because it is a more familiar term than affect. Affect is defined as the experience of positive or negative emotions at a certain point in time (OECD 2013).</p>	<p>Individuals experience high average levels of positive affect which benefits their interpersonal relationships, creativity, sociability, and productivity.</p> <p>Individuals are able to restore autonomic (unconscious or involuntary responses) responses after the experience of adverse negative affect.</p>	Communities live happy and healthy lives driven by success and thriving.	Individuals and communities respond to detrimental occurrences in the macro environment influencing their health and wellbeing (for example, human rights).
Access to resources	Resources that people need access to for their livelihoods.	Individuals have access to organisations; this provides them with opportunities to access different forms of social capital (the norms, social networks and trust in a community, which contribute to pursuing mutual objectives (Harper 2001; Putnam 2001)).	Communities provide opportunities for individuals to access different organisations and social structures.	<p>The state ensures that socio-economic distribution of neighbourhood resources is equal for each community.</p> <p>Co-production between local and external organisations.</p>
Healthy environments	Physical, social and service environments of neighborhoods which promote health (Cubbin et al. 2008).	Individuals have access to health promoting amenities and resources which enable them to maintain healthy lives.	Communities have established health promoting amenities and resources.	The state ensures that cities are healthy places for communities to live in.

Culture	Knowledge, beliefs, values and systems of symbolic meaning that individuals draw on in everyday life (Spencer-Oatey, 2012).	<p>Individuals have a sense of identity and culture.</p> <p>Individuals are free to express and live according to their cultural values and norms.</p> <p>Individuals have the freedom of religious expression.</p>	<p>Communities create opportunities for recreation, physical activity, self-expression of individuals.</p> <p>Communities create opportunities for celebration of cultural values.</p> <p>Communities provide an opportunity for individuals to celebrate difference.</p>	Individuals and communities feel free to exercise their culture in an environment that encourages equity and respect for human rights.
Empathy	Empathy reflects an innate ability to perceive and be sensitive to the emotional states of others coupled with a motivation to care for their wellbeing (Decety, 2015).	Individuals are able to understand the perspective of others	Community members are interdependent, experiencing high levels of empathy.	An understanding that various factors impact on the ability to empathise: motivational forces (eg. need to belong); situational cues (eg. attraction); individual or group differences (eg. gender, ethnicity); education level; self-monitoring; culture; and relationship-specific factors (Sherman et al 2015).
Helpfulness	Positive attitude and willingness to help others.	Individuals have positive attitudes to helping others.	Community members experience high levels of helpfulness.	There is a good understanding about what contextual and structural factors influence the levels of helpfulness in different communities and cultures.
Interpersonal relationships	<p>Interpersonal relationships can be:</p> <ul style="list-style-type: none"> - Bonding (based upon strong ties that connect homogeneous groups). - Bridging capital (between people who are from different ethnic or occupational backgrounds). - Linking (between people with different levels of power and status). 	<p>Individuals are able to benefit from functional aspects of interpersonal relationships such as emotional support, companionship or advice in experiences of adverse stress.</p> <p>Individuals are socially connected in a way that a change in behavior in one is</p>	<p>Communities recognise the principles of equalities and social justice.</p> <p>Difference within and outside of the community group are acknowledged and accepted.</p> <p>Communities provide widespread opportunities for</p>	<p>Different community groups, forums, and organisations participate in the voluntary health sector and provide valuable source of experience and innovation for national legislation.</p> <p>Efforts to address inequalities.</p>

		<p>likely to produce a change in behavior of the other.</p> <p>Individuals are involved in community activities which contribute to the improvement of their health and wellbeing.</p>	<p>informal contacts and support networks.</p> <p>Community organisations work with wider networks to mutual advantage.</p> <p>Communities are socially connected which contributes to the improvement of their health and wellbeing.</p>	
Optimism	Expectations about the occurrence of good outcomes in one's future (Pinquart, Fröhlich, & Silbereisen, 2007).	<p>Individuals have positive expectations about their future.</p> <p>Individuals engage in efforts towards desired goals.</p>	Communities provide positive opportunities for people's future.	New opportunities are created and potential influence for improvements.
Physical Health	The functioning of your body as it is designed to function.	<p>Individuals lead healthy lives</p> <p>Individuals are able to have optimal levels of wellbeing</p>	Communities have a high percentage of physically healthy individuals.	Physical health of the population has improved. People live healthier and long lives.

Self-determination	Psychological construct which refers to the internal motivation of the self to behave in an autonomous and controlled way.	<p>Individuals experience greater autonomy in their everyday life.</p> <p>Individuals are able to express their individuality and self-identity.</p> <p>Individuals are able to regulate their behaviour in congruence to their values and needs.</p> <p>Individuals are able to make informed decisions about participating in support services which will best meet their needs and improve their health and wellbeing.</p> <p>Individuals are able to maintain their independence as they get older and are able to access appropriate support when they need it.</p>	<p>Communities are aware of their needs, as well as assets.</p> <p>Communities are able to make informed choices about their political, social, and cultural development in order to create healthier neighbourhoods.</p>	Local communities participate actively in public affairs and decision making on a national level in regards to the delivery of health services and interventions.
Spirituality	The quality to strive for meaning and purpose by believing in a spiritual dimension.	Individuals construct their own spirituality which help them cope with stressful and threatening situations.	Communities encourage individuals to express their spirituality, as well as provide an environment where they can be developed.	People are contributing to societal change through their different spirituality.
Personal Meaning	The striving to answer infinite questions when facing emotional difficulties, stress, illness or death.	Individuals have a purpose in life which is determined by their personal meaning and values.	Communities encourage individuals to express their personal meaning.	People are contributing to societal change through their different meanings of life.
Trust	Trustworthiness experienced in a reciprocal relationship. Forms of trust: - in close interpersonal relationships (such as family and close friends);	Individuals are trusting.	Communities have high levels of trust and co-operative norms.	Society is safe from crime, disorder and danger.

	- social connectedness with the wider community or members of the outside community.	Individuals are able to build different social relationships.		
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Appendix 2. Measurement of ABIF indicators

The table summaries how data may be collected for each of the developed ABIF indicators based on recommendations from the extensive literature review. It also presents the “aim of evaluation” for each indicator’s measurement; reviews existing measurement approaches and means of data collection; and includes a commentary on how the measurement of each indicator can be implied to serve the aims of co-production and asset-based working.

Indicator	Aim of Evaluation	Review of Existing Evaluation Approaches	Means of Data Collection	Commentary
Happiness	<p>To capture data on positive/negative emotional states experienced by the community members involved in asset-based initiatives before, during, and after the project/programme/ intervention.</p> <p>To identify whether there has been a shift in levels of experienced positive/negative affect of the local community and its members during and after participating in the engagement.</p> <p>To identify whether/how this shift is related to any of the activities included in the project.</p>	<p>We are providing evaluation tools to measure affect</p> <p>The evaluation of happiness can be done by the evaluation of the experience of positive or negative affect. Affect can be oriented towards a specific emotional state and its related behaviour (e.g. anxiety, calmness) or a global domain of content (e.g. positive and negative emotions).</p> <p>The pleasure dimension of affect is related to the experience of love, joy and pride.</p> <p>Displeasure is related to fear, anger, sadness and shame (Ekkekakis and Russell 2013).</p>	<p>The experience of affect can be gathered through questionnaires including 5- or 10- points feeling scales (OECD 2013; Stevenson 2013). The practitioner reads out loud a list of ways the interviewed person might have felt (the previous day or previous month, during the intervention, after the intervention) and the person answers on a 5- or 10-points-scale.</p> <p>Information about the activation event for the experience of pleasure or displeasure can be collected through time-use diaries (OECD, 2013). Time-use diaries collect information about the type of activity, the location, the people with</p>	<p>Interpretation of results given by scales or questionnaires could cause some problems when applied to various cultures due to cultural diversity.</p> <p>For example, the typical response to the question “How are you feeling?” in many Western cultures is “good,” the baseline Feeling Scale rating is usually +3 (which is anchored by the adjective “good”). In other cultures, however, the rather bold statement “I feel good” is reserved for only those cases in which a preceding positive event would justify “feeling good.”</p> <p>It is important for researchers and practitioners to firstly identify and integrate the baseline rating to the specific culture <i>before</i> using the scale.</p>

			<p>whom the person was, and the purpose of the activity. These are valuable co-variables when analysing the experienced affect and its impact on wellbeing (OECD 2013).</p> <p>As co-production may include various partners as equal and active participants, practitioners can also use reflective diaries to collect data. This will capture their own affective experiences and allow for an in-depth level of analysis when cross-referencing with community members' experiences.</p>	<p>When using time diaries in co-production, data should be analysed together with the individuals who produced them. This allows them to contextualise and elaborate on the experience and explain what meaning it has had for them.</p> <p>Practitioners will then be able to explore what change is meaningful for community members and to analyse the 'theory of change' – in what context and under which conditions does change happen?</p> <p>For the ABIF, the dimensional approach is recommended. Practitioners should examine the global domain of the experienced affect – which emotions cause pleasure or displeasure? – and what was the <i>activation event</i> (Russell 1980).</p>
Access to Resources	<p>To evaluate how accessible different resources are for a specific community.</p> <p>To account for communities' expectations and "wishes" with regards to access to various resources (including different organisations).</p>	<p>Access to resources is determined by the socioeconomic status (SES) of individuals and communities, where SES has been defined as a 'differential access to desired resources' (Oakes and Rossi 2003, p.775). Access to resources is therefore measured through the use of SES measurement tools.</p> <p>Consider how SES influences different factors such as access</p>	<p>A simple questionnaire or semi-structured conversation / interview with community members can capture this data. This will give participants with the opportunity to share their ideas about the particular topic in their own terms and facilitate the co-creation and evaluate the primary data (Newton, 2010).</p>	<p>As noted in the personal outcomes literature, it is very important to understand what community members feel they have access to, how these resources are important to them.</p>

	To understand what resources are important to community members.	to transportation to medical appointments, type of health insurance, type of healthcare facility and provider, availability for care (i.e. the ability to take time off work or availability of child care), and knowledge of appropriate care (Shavers, 2007).	Creative approaches should also be encouraged. For example, drawing pictures or taking photographs of their environments or journeys to work if employed.	
Healthy Environment	<p>To evaluate how healthy the environment in which a community lives is.</p> <p>To account for changes in the environment that community members would like to see.</p> <p>To understand what a community considers to be a healthy environment.</p>	<p>The characteristics of an environment in which communities live can also be measured by using contextual measures of SES (Shavers 2007).</p> <p>Contextual approaches typically involve ecologic area measures and may also involve multilevel analyses. Contextual approaches to SES examine the social and economic conditions that affect all individuals who share a particular social environment.</p>	<p>Contextual questionnaires</p> <p>Semi-structured interviews</p>	It is important to understand how communities assess and experience their environment .
Culture	<p>To assess how cultural values, beliefs and norms can influence the improvement of wellbeing.</p> <p>To establish how community members experience their cultural identity. What does it mean for them to belong to a culture? What impact does it have on their everyday life?</p>	<p>Due to its very broad conceptualisation, Culture cannot be evaluated per se.</p> <p>Culture has mostly been explored in ethnographic and anthropological research into the organisational functioning of different community structures.</p>	<p>Norms, beliefs, and values of a particular community can be understood through the use of interviews or observational studies.</p> <p>Ongoing observation in particular facilitates a deep understanding of what cultural practices exist in a community and how these impact their everyday lives, interpersonal relationships,</p>	<p>It is crucial for researchers and practitioners to capture how community members exercise their culture. It would also be of interest for asset-based initiatives to determine how culture influences the construction of the different assets mentioned in the framework.</p> <p>It could therefore be invaluable to include a ‘cultural aspect’ to the evaluation of each indicator.</p>

	To measure how and whether creative co-production can encourage the expression of community cultural values, norms, beliefs, and rituals.		social structure, and how they use and experience their living environment.	
Empathy	To identify whether a sense of empathy is present in a community.	<p>The literature distinguishes between measurement of empathic reactions in a specific situation or empathy as a stable person's character trait.</p> <p>There are three approaches to the measurement of empathy: self-reported measures, behavioural measures, and neuroscientific measures (Neumann et al., 2015).</p>	<p>Self-reported questionnaires include statements related to empathy with scales indicating whether participants agree or disagree.</p> <p>Behavioural tools include evaluations of experimental stimuli and performance on tests. Neuroscientific approaches include brain imaging techniques, EEG, EMG and automatic nervous system measures.</p> <p>Visual stimuli –pictures with people experiencing different emotions or expressing emotions in different scenes – can be used to measure individuals' empathic reactions.</p> <p>Empathic questionnaires can evaluate the stable empathy character of a person. These questionnaires use cognitive and affective statements which are answered on an agree-disagree-point scale (Zoll and Enz 2005).</p>	<p>Self-reported empathy measures can be used during the process of co-production.</p> <p>Interviews or structured conversations provide opportunities to explore what empathy means to community members, how they experience empathy, and how they think empathic communication can improve community wellbeing.</p>

Helpfulness	To identify the extent to which community members participating in a co-production initiative improve their likeliness to help others.	Pepitone's (1999) observed that there are multiple, distinct motivations underlying different helping behaviors. However, there are ways to evaluate the quality of a helping environment in a community (Levine 2003).	Helping Attitudes Scale (HAS)	Observations of group dynamics could help assess how community members express helpfulness towards each other.
Interpersonal relationships	<p>To gather evidence on community members' existing interpersonal relationships.</p> <p>To assess what types of interpersonal relationships, support systems and social networks exist and are favoured by particular communities.</p> <p>To identify which relationships are considered important to community members and create opportunities to strengthen or deepen them.</p>	<p>As interpersonal relationships are elements of social capital, questions related to the levels and types of connectedness of individuals are usually integrated in measurement tools for social capital (Harpham et al. 2002; Harper 2001; (Welsh & Berry, 2009)).</p> <p>Distinctive features for social connectedness and participation are:</p> <ul style="list-style-type: none"> - frequency and intensity of involvement with cultural, religious, leisure and social groups, voluntary organisations and clubs. - frequency of seeing and speaking to relatives, friends or neighbours. - depth of the socialisation network. - proximity of relatives or friends. - perceptions of social support and connectedness. 	<p>Relationship Mapping is a useful tool (Welsh and Berry 2009).</p> <p>An individual is positioned in the middle of a diagram and people they know are plotted on it, putting them closer or further from themselves depending on the closeness of the relationship.</p> <p>After drawing the map, the individual should be asked further questions to acquire more information about the frequency and intensity of the drawn relationships and to gain an insight into:</p> <ul style="list-style-type: none"> - How the person feels about their map? - Is there anything they want to change? - What is the perception of their own connectedness and what it means to them? - Functionality of the different relationships. - 	<p>For asset-based working, it is also necessary to investigate how community members perceive their relationships or lack of such with the practitioners or researchers involved in the project.</p> <p>Similarly, it would be useful to gather researchers' perceptions of their relationships with community members.</p> <p>As co-production is based on the principle of equal and active participation of all partners, it would be valuable to analyse how relationships between stakeholders are formed (or how they break down or are not sustained) throughout the duration of the project.</p> <p>Gathering different stakeholders' perspectives of how the context of a initiative might have had an impact on the development of these relationships would also be useful.</p>

		<ul style="list-style-type: none"> - degrees of citizenship. - links to groups with resources (e.g. local government, aid agencies). - links to other communities (Harper 2001; Harpham et al. 2002). 	<p>Who do they approach if they need advice, comfort or support?</p> <p>- What are the relationships they feel they can contribute to?</p> <p>This tool can be used at intervals during an intervention to assess whether and how the social networks and relationships have changed. This will also help individuals to see the changes they have made (Welsh and Berry 2009).</p> <p>Weekly diaries can also be used to look at the frequency and involvement of community members in different groups, organisations and social networks (Welsh and Berry 2009).</p> <p>The completion of the diary can be followed by questions related to the satisfaction of the individual with the activities described in the diary, their sense of contribution and participation, and the things they would like to change. Diaries from different weeks can be compared to identify changes and reasons for these.</p>	
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Optimism	<p>To measure levels of optimism in health and health outcomes before and after co-produced engagements.</p> <p>To capture changes in participants' expectations after participating in respective co-produced initiatives.</p> <p>To identify how optimistic or pessimistic views of particular individuals can influence the wellbeing and resilience of a community.</p>	<p>One way of measuring optimism is asking individuals about their expectation for life (Carver et al. 2014). The Life Orientation Test which consists of negative and positive statements to which people agree or disagree on a multi-point scale can be used to gauge this (Carver et al. 2014).</p> <p>Examining patterns of individuals' attributions about causes of events is also useful for evaluation. If people view past negative experiences as stable causes then they would appear to be more pessimistic, whereas when they see negative experiences as unstable their expectations for the future is predicted to be rather positive (Carver et al. 2014).</p>	<p>Ongoing engagements with communities through observation, creative activities, conversations or semi-structured interviews could identify potential negative coping mechanisms and direct community members to appropriate services and/or offer healthier alternatives/</p>	<p>The measure of optimism in asset-based interventions or programmes will allow for gathering and understanding community members' perceptions about their future (at baseline).</p> <p>Changes can then be captured and understood by systematically applying the ABIF over time. In this way, practitioners will gain an understanding of which programme or initiative component had the biggest impact or initiated change.</p>
Physical Health	<p>To identify whether communities live healthy lives.</p> <p>To assess whether communities have and are able to maintain optimal levels of wellbeing.</p> <p>To evaluate changes in physical health or habits influencing on health and wellbeing before, during and after co-production.</p>	<p>It is difficult to operationalise health and measure it in a quantifiable way. Social researchers use self-rated measures of physical health which are considered to be reflective of physical health status, symptoms, function, and health behaviors (Fayers and Sprangers 2002).</p> <p>Self-related health measures can provide information about the physical health of an individual at a particular point</p>	<p>Research suggests, that when using self-rated health measures with adults it is more appropriate to use measures with specified response options (Eriksson et al. 2001).</p>	<p>Self-rated health measures seem to be appropriate evaluation tools for measuring physical health during co-produced initiatives.</p> <p>Researchers and practitioners should also investigate what difficulties community members might encounter in sustaining good physical health and whether such opportunities were provided through participation in co-produced initiatives.</p>

		of time, and also about their general physical health.		
Self-determination	<p>To identify levels of self-determination before participation in asset-based working and whether there has been a change in their sense of self.</p> <p>To examine how community members perceive choice before, during and after participation in the co-production activity.</p>	<p>The literature identifies two approaches in the evaluation of self-determination levels.</p> <p>The Basic Needs Satisfaction in General Scale (BNSG-S) assesses the satisfaction of individuals' three basic needs (autonomy, competency, and relatedness) in a general context. The questionnaire consists of 21 statements answered on a not at all true/very true scale.</p> <p>The Self-Determination Scale (SDS) examines how aware people are of their feelings and sense of self and how they perceive choice in their own actions (Lewis et al., 2014). The tool consists of 10 items answered on a 5 point true or false scale.</p>	<p>The Basic Needs Satisfaction in General Scale (BNSG-S) and the Self-Determination Scale (SDS).</p>	<p>The downside of using these tools is that the ways of fulfilment and importance of the needs, as well as understanding of self-determination, are dependent on the values and goals shared by the culture of a specific community.</p> <p>Standardised questions would not provide a culturally sensitive evaluation and might disrupt any interpretation of results (Bailey 2012).</p> <p>If practitioners and researchers decide to use standardised measurement tools they would need to test their reliability and validity for the specific culture by interviewing respondents about their understanding and significance of the three needs and self-determination.</p>
Spirituality	<p>To identify whether individuals identify with any spiritual sources of hope, strength, comfort, peace, love and meaning.</p> <p>To understand whether community members participate in organised spiritual practices and</p>	<p>Spirituality is often evaluated through assessment inventories, which identify different aspects of spirituality and their relevance for the individual.</p> <p>An established framework for the assessment of spirituality has also been</p>	<p>The framework includes general open-ended questions to gather information about the spiritual or religious traditions in which an individual has grown up, their personal spiritual experiences, and what meaning these experiences have for them.</p>	<p>The spirituality framework could be adapted to explore whether co-produced activities have an impact on community members' spiritual practices or relate to their personal values.</p>

	<p>understand what these mean to them.</p> <p>To explore whether / how community members' spiritual practices influence their health and wellbeing.</p>	widely used in social work (Hodge 2001).	<p>The second part of the framework consists of questions which could give an interpretative aspect to initial questions. They ask for information about the impact of the person's spirituality on their affect (for example, what aspects of the person's spirituality give them pleasure?); behaviour (are there any spiritual practices that help the person deal with difficult situations?); cognition (what are the person's beliefs and what are they based upon?); conscience (how the person determines right and wrong; what are they key values?).</p> <p>The framework can be adapted to explore the personal meaning and values of individuals even if they do not identify with a particular spiritual belief.</p>	
Personal Meaning	To explore community members' values and understand what personal meaning is to them.	<p>Personal meaning cannot be measured per se but it can be explored through the use of semi-structured interviews or are simply asked to describe what they associate with a target word or phrase.</p> <p>Personal Meaning Mapping.</p>	<p>Personal Meaning Mapping is ideal for capturing the highly personal and individual responses. It can provide both qualitative and quantitative data and can be used to assess changes over time.</p> <p>To start a Personal Meaning Map individuals are presented with a single word or short phrase at the centre</p>	It is important for researchers to abandon any predisposed perceptions about individuals' personal meanings. Researchers should explore how personal meaning can impact on the community and vice versa.

			of the page. The person is then asked to add words, phrases or pictures that they associate with the target word or phrase. They can also be asked to illustrate linkages they perceive to exist between these concepts and to add further orders of concepts – i.e. concepts they perceive to be linked to the concepts generated by the initial target word/phrase.	
Trust	<p>To evaluate community members' levels of trust in relation to their family members, community as well as those outside of communities such as practitioners, researchers and representatives from organisations involved in co-produced activities.</p> <p>To evaluate factors such as individuals' propensity to trust others, their perceptions about others reliability, and levels of risk aversion should also be included when evaluating individuals' levels of trust.</p> <p>.</p>	<p>A review of various measurement tools of trust suggests that statements related to trust should include following facets: reliability, benevolence, predictability, availability, dependability, consistency, openness, fairness, discreteness (Tschannen-Moran and Hoy 2000).</p> <p>Statements related to the three different forms of trust – family, community and organisational – should each incorporate all the above mentioned facets to provide a consistent observation and evaluation of individuals' trust.</p> <p>The propensity to trust others can be evaluated by using generalised statements such as 'Other people cannot</p>	<p>Questionnaires asking respondents about their level of agreement with various statements (Tschannen-Moran and Hoy 2000).</p> <p>Levels of trust in a community can also be measured by looking at the levels of participation in different community initiatives, organisations or social networks, and engagement in cultural practices.</p>	<p>It is of great importance for researchers and practitioners to look at the social and cultural context in which a trustful or untrustworthy relationship is embedded to determine how and why context can influence trust and more specifically, how trust can be built in co-production (Tschannen-Moran and Hoy 2000).</p> <p>Researchers and practitioners would need to acquire information about the meaning of trust for the community – what do they perceive as trustful and untrustworthy relationships?</p>

		<p>be relied upon' or 'Other people lie to get ahead', etc (Ashleigh et al. 2012).</p> <p>The risk aversion aspect will evaluate levels of loss of trust to others (Ashleigh et al. 2012).</p>		
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